

10/01/01
JC985 U.S. PTO
Barcode

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

UTILITY PATENT APPLICATION TRANSMITTAL FORM
(only for new nonprovisional applications under 37 CFR 1.53(b))

J1000 U.S. PTO
09/846588
05/01/01
Barcode

ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231
BOX: PATENT APPLICATION

SIR:

Transmitted herewith for filing is the patent application (including Specification, Claims, Sequence Listing (if applicable) and Abstract, 51 pages) of:

Inventor(s): **Steven A. Goldman and Abdellatif Benraiss**

For : **METHOD OF INDUCING NEURONAL PRODUCTION IN THE BRAIN AND SPINAL CORD**

***If a CONTINUING APPLICATION, please mark where appropriate and supply the requisite information below and in a preliminary amendment:*

Continuation Divisional Continuation-In-Part (CIP)
of prior application Serial No. _____

Prior application information: Examiner :
Art Unit :

Enclosed are:

- 11 sheets of formal drawings.
- Signed Combined Declaration and Power of Attorney (_____ pages).
- Copy of signed Combined Declaration and Power of Attorney (_____ pages) from a prior application (1.63(d) (for continuation/divisional).
- Signed statement deleting inventor(s) named in prior application (_____ pages) (1.63(d)(2) and 1.33(b)).
- Incorporation By Reference:** The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied herewith, is considered as being part of the disclosure of the enclosed application and is hereby incorporated by reference therein.
- Assignment (_____ pages) of the invention to _____.
- Assignment Transmittal Letter.
- Certified copy of a foreign priority document.
- Associate power of attorney.
- Applicant claims small entity status. (See 37 CFR 1.27.)

Preliminary Amendment (pages).

Information Disclosure Statement, form PTO-1449 (pages) and references.

UNSIGNED Combined Declaration and Power of Attorney (2 pages).

Statement in Accordance with 37 CFR § 1.821(f) and computer readable 3.5" Diskette.

A self-addressed, prepaid postcard acknowledging receipt.

Other:

The Filing fee has been calculated as shown below:

| | (Col. 1) | (Col. 2) |
|---|-----------|-----------|
| FOR: | NO. FILED | NO. EXTRA |
| BASIC FEE | XXXXXXXX | XXXXXXXX |
| TOTAL CLAIMS | 47 - 20 = | 27 |
| INDEP CLAIMS | 4 - 3 = | 1 |
| <input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED | | |

*If the Total Claims are less than 20 and Indep. Claims are less than 3, enter "0" in Col. 2

| SMALL ENTITY | LARGE ENTITY |
|--------------|--------------|
| OR | OR |
| RATE | RATE |
| XXXX | \$355 |
| x 9 = | \$243 |
| x 40 = | \$ 40 |
| x135 = | \$ 0 |
| TOTAL | \$638 |
| OR | OR |
| XXXX | \$710 |
| x 18 = | \$ |
| X80 = | \$ |
| x270 = | \$ |
| OR | TOTAL |
| | \$ |

A check in the amount of **\$638.00** to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. **14-1138**. **A duplicate copy of this sheet is enclosed.**

Address all future communications to:

Michael L. Goldman, Esq.
NIXON PEABODY LLP
Clinton Square, P.O. Box 31051
Rochester, New York 14603-1051

Date: May 1, 2001


Michael L. Goldman
Registration No. 30,727

NIXON PEABODY LLP
Clinton Square, P.O. Box 31051
Rochester, New York 14603-1051
Telephone: (716) 263-1304
Facsimile: (716) 263-1600

J1000 U.S. PTO
09/09/04 846588
05/01/01

EXPRESS MAIL CERTIFICATE

DOCKET NO. : **19603/3232 (CRF D-2587B)**

APPLICANT(S) : **Steven A. Goldman and Abdellatif Benraiss**

TITLE : **METHOD OF INDUCING NEURONAL PRODUCTION IN THE BRAIN AND SPINAL CORD**

Certificate is attached to the **Patent Application Including Specification, Claims, and Abstract (51 pages) and Unsigned Combined Declaration and Power of Attorney (2 pages)** of the above-named application.

“EXPRESS MAIL” NUMBER: **EL709323339US**

DATE OF DEPOSIT: **May 1, 2001**

I hereby certify that this paper or fee is being deposited with the United States Postal Service “Express Mail Post Office to Addressee” service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231, **Box Patent Application**.

Sherri A. Moscato

(Typed or printed name of person mailing paper or fee)

Sherri A. Moscato

(Signature of person mailing paper or fee)